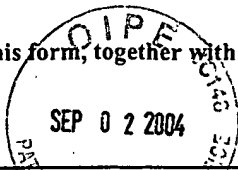


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Complete and send this form, together with applicable fee(s), to: Mail

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25291 7590 06/08/2004

WYETH
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Paula L. Dickey

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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/016,743	11/02/2001	Annmarie L. Sabb	AM100317	5417

TITLE OF INVENTION: CYCLOHEPTA [B] [1,4] DIAZEPINO [6,7, 1-HI] INDOLES AND DERIVATIVES

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	09/08/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
COLEMAN, BRENDA LIBBY	1624	514-219000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Kimberly R. Hild

2 _____

3 _____

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Wyeth

Madison, New Jersey

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☐ corporation or other private group entity ☐ government

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(Authorized Signature)

(Date)

Kimberly R. Hild 39224 September 2, 2004

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